BOPUK 531.01 * INMATE HISTORY * 09-08-2006 PAGE 001 * WRK DETAIL * 07:44:54

REG NO.: 17110-016 NAME...: HILL, KENNY CATEGORY: WRK FUNCTION: PRT

FORMAT:

FCL	ASSIGNMENT	DESCRIPTION	START DATE	TIME	STOP DATE	/TIME
PET PET	ORD CAR H VACATION	ORD CAR H ALL VACATIONS	04-17-2006 04-11-2006		CURRENT 04-17-2006	0001
PET	ORD CAR H	ORD CAR H	01-18-2005	0001	04-11-2006	0001
PET	ORD EDUC	EDUCATION ORDERLY	09-29-2004	0001	01-18-2005	0001
PET	UNASSG	UNASSIGNED WORK DETAIL	09-27-2004	1552	09-29-2004	0001
PET	A/O	NEEDS A/O PROCESSING	08-27-2004	1239	09-27-2004	1552
PEM	UNASSG	UNASSG	08-25-2004	1447	08-27-2004	1216
PHL	UNASSG	UNASSG	08-23-2004	1658	08-25-2004	0650
LEW	UNASSG	UNASSIGNED WORK DETAIL	08-20-2004	1429	08-23-2004	0927
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	04-17-2004	0001	08-20-2004	1045
MCK	VACATION	VACATION	04-16-2004	0001	04-17-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	03-25-2004	0001	04-16-2004	0001
MCK	VACATION	VACATION	03-24-2004	0001	03-25-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	03-13-2004	0001	03-24-2004	0001
MCK	VACATION	VACATION	03-12-2004	0001	03-13-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	02-14-2004	0001	03-12-2004	0001
MCK	VACATION	VACATION	02-13-2004	0001	02-14-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	01-21-2004	0001	02-13-2004	0001
MCK	VACATION	VACATION	01-20-2004	0001	01-21-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	11-29-2003	0001	01-20-2004	0001
MCK	VACATION	VACATION	11-26-2003	0001	11-29-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	10-24-2003	0001	11-26-2003	0001
MCK	VACATION	VACATION	10-23-2003	0001	10-24-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	09-16-2003	0001	10-23-2003	0001
MCK	VACATION	VACATION	09-15-2003	0001	09-16-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	07-19-2003	0001	09-15-2003	0001
MCK	VACATION	VACATION	07-17-2003	0001	07-19-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	04-17-2003	0001	07-17-2003	0001
MCK	VACATION	VACATION	04-14-2003	0001	04-17-2003	0001

MCK	I LAYUP 2	3:00 PM TO 11:00	PM	12-21-2002	0001	04-14-2003	0001
MCK	VACATION	VACATION		12-20-2002	0001	12-21-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00	PM	10-12-2002	0001	12-20-2002	0001
MCK	VACATION	VACATION		10-10-2002	0001	10-12-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00	PM	08-19-2002	0001	10-10-2002	0001
MCK	UNASSG	UNASSIGNED		08-15-2002	1125	08-19-2002	0001
MCK	SHU UNASSG	SHU UNASSIGNED		08-12-2002	1657	08-15-2002	1125
MCK	I LAYUP 2	3:00 PM TO 11:00	P M	06-21-2002	0001	08-12-2002	1657
MCK	VACATION	VACATION		06-17-2002	0001	06-21-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00	P M	05-08-2002	0001	06-17-2002	0001
MCK	UNASSG	UNASSIGNED		04-29-2002	0754	05-08-2002	0001
MCK	SHU UNASSG	SHU UNASSIGNED		04-07-2002	1917	04-29-2002	0754

G0002 MORE PAGES TO FOLLOW . . .

BOPUK 531.01 * INMATE HISTORY * 09-08-2006 PAGE 002 OF 002 * WRK DETAIL * 07:44:54

REG NO..: 17110-016 NAME....: HILL, KENNY

FCL	ASSIGNMENT	DESCRIPTION	START DATE/TIME STOP DATE/T	TIME
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	02-16-2002 0001 04-07-2002 1	917
MCK	VACATION	VACATION	02-14-2002 0001 02-16-2002 0	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	08-25-2001 0001 02-14-2002 0	0001
MCK	VACATION	VACATION	08-24-2001 0001 08-25-2001 0	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	07-05-2001 0001 08-24-2001 0	0001
MCK	I PACK 1	PACKING 1	06-19-2001 0001 07-05-2001 0	0001
MCK	ORD B A	ORDERLY BA	04-12-2001 0001 06-19-2001 0	0001
MCK	UNASSG	UNASSIGNED	04-11-2001 0001 04-12-2001 0	001

SAYOP 2

Industrial Employment/IPRS Action Report

1. Type Of Report: UNICOR Action = 1 IPRS Action = 2	? Both = 3
	tems 3, 4-6, 13-21, 24, and 26 Status, Complete Items 4 - 21, and 26 nent, Complete Items 3, 4 - 12, 19 - 23, 26
3. If IPRS Action Enter 2 For Enrollment, Complete Ite Enter 3 For Completion, Complete Ite Enter 4 For Withdrawal, Complete Ite	iems 4 - 6, 19
4. Register Number 5. Resident Name (Last, Fir	st, Middle) 6. Institution Code
Action Recommended	
From: 7. Job 8. Grade 9. Industry 10. Wage 11. Dot Number 1 · 4 Code Plan Code	12. Position Title
0 1 2 4 MCPP 1 769687054	
1 = Hourly 2 = G.P.W. X = Appre	ntice
To: 3 = P.W. 13. Job 14. Grade 15. Industry 16. Wage 17. Dot Number 1 - 4 Code Plan Code	18. Position Title
19. Effective Date Month, Day, Year	21. Check One: AM PM
0 8 - 2 0 - 0 4 0 7 1 0	<u> </u>
22. Reason For Termination Of Employment Or Withdrawal	
1 = Released 2 = Transferred 3 = Program Change	4 = Inmate Request Institutional Needs
23. Continuation of Longevity Status 1 = yes 0 = no 2 = no (For use only when termination)	n is for release (MR or parole)
- - 24. Date Of Enrollment Month, Day, Year	
25. Total Inmate Hours Involved	
26. Signatures:	
Recommended By	Foreman Date:
Approved By	Plant Superintendent Date:
Approved By	Ass't Supt. Or Business Mgr. Date:
Entered On Payroll Records	_ Timekeeper Date:
Revised Form 96	Green

Distribution:

White------ Business office Canary----- Terminal operator

Pink------ Placement

Case 1:03-cv-00368-S	SJM-SPB Documo	ent 7 9-23	Filed 02/02/2007	Page 4 of 42
UNICOR Federal Prison Industries, Inc.		mploym	ent/IPRS A	ction Report
3 1. Type of Report:	UNICOR Action = 1 IPRS	Action = 2 Both =	3	
2. If UNICOR Action	Enter 1 For Newly Hired, (Enter 2 For Change In Em Enter 3 For Termination O	ployment Status,	Complete Items 4-21, and	
3. If IPRS Action	Enter 2 For Enrollment, Co Enter 3 For Completion, C Enter 4 For Withdrawal, C	omplete Items 4-	6, 19	
4. Register Number	5. Resident Nar	me (Last, First, M	iddle)	6. Institution Code
1 7 1 1 0 - 0 1 6 H	HILL, KEND	X		2 3 1
Action Recommended				
<u>From:</u> 7. Job 8. Grade 9. Industry Number 1 - 4 Code	10. Wage 11. Dot Plan Code		12. Position Title	
0 1 2 4 M C F T	7 6 9 6 8	3 7 9Q 5 4	WD RK S	HOPHAND
<u>To:</u>	1 = Hourly 2 = G.P.W. 3 = P.W.	— X = Apprentice	,	
13. Job 14. Grade 15. Industry Number 1 - 4 Code	16. Wage 17. Dot Plan Code		18. Position Title	
19. Effective Date 20 Month, Day, Year	Time of Action		21. Check One:	AM PM
0 6 - 1 9 - 0 1	0 7 1 0			
22 Reason For Termination	n Of Employment Or Witho	Irawal		
1 = Released 2 = Trar 5 = Program Discontinue	nsferred 3 = Program Ch ed 6 = Control Purposes	ange 4 = Inma 7 = Institutional	te Request Needs	
23. Continuation of Longev 1 = yes 0 = no 2 = no		mination is for re	ease (MR or parole).	
24. D	eate Of Enrollment Month, Da	ay, Year		
25. Total Inm	nate Hours Involved			
26. Signatures:		·		
Recommended By	Marie	Foreman		Date: (2/3)//0/
Approved By		Plant Superii	ntendent	Date:
Approved By		Ass't Supt. C	r Business Mgr.	Date:
Entered On Payroll Records	5 7. A. A.	Timekeeper		Date: <u>(6/27/0)</u>

FPI Form 96 (9/98)

FACTORY RULES AND REGULATIONS

2	-	
1/- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-		
NAME Comer Rell	C	
NAME Comey fell	UNIT BA-235-L LOCKER#	Сыт#
	· · · · · · · · · · · · · · · · · · ·	CΠΠΨ

- INMATE WORKERS ARE FORBIDDEN TO LEAVE THE DEPARTMENT TO WHICH THEY ARE ASSIGNED, UNLESS THEY RECEIVE PERMISSION FROM THEIR FOREMAN OR SUPERVISOR. WHEN ENTERING ANOTHER DEPARTMENT, THEY MUST REPORT IMMEDIATELY TO THE SUPERVISOR IN CHARGE. INMATE WORKERS ON CALL-OUT MUST NOTIFY THEIR FOREMAN OR SUPERVISOR PRIOR TO LEAVING ON A CALL-OUT, AND ONCE THEY RETURN FROM A CALL-OUT.
- 2. ALL INMATES MUST WEAR STEEL TOE SAFETY SHOES WHILE WORKING IN UNICOR.
- 3. SAFETY GLASSES MUST BE WORN AT ALL TIMES WHILE IN THE FACTORY.
- 4. HEARING PROTECTION MUST BE WORN AT ALL STATIONS DESIGNATED AS HIGH NOISE LEVEL AREAS.
- INMATES WILL PREFORM ANY ASSIGNED DUTIES GIVEN TO THEM BY ANY FOREMAN OR SUPERVISOR.
- 6. INMATE WORKERS WILL ONLY PERFORM TASKS THAT ARE ASSIGNED TO THEM. OPERATING ANY MACHINERY OR EQUIPMENT, OR PERFORMING ANY OPERATION THAT HAS NOT BEEN SPECIFICALLY ASSIGNED BY A SUPER-VISOR IS STRICTLY FORBIDDEN AND WILL BE SUBJECT TO AN INCIDENT REPORT.
- 7. OPERATING ANY EQUIPMENT WITHOUT USING THE SAFETY GUARDS PROVIDED, OR REMOVAL OF SAID GUARDS IS FORBIDDEN AND SUBJECT TO DISCIPLINARY ACTION.
- 8. HORSEPLAY WILL NOT BE TOLERATED AND IS SUBJECT TO REMOVAL FROM UNICOR EMPLOYMENT.
- 9. FORKLIFT OPERATORS ARE THE ONLY ONES AUTHORIZED TO RIDE ON THE FORKLIFTS. DO NOT RIDE ON THE FORKLIFTS OR PALLET-TRUCKS.
- 10. REPORT ALL SAFETY HAZARDS TO YOUR SUPERVISOR IMMEDIATELY. DO NOT CONTINUE TO WORK UNDER UNSAFE CONDITIONS.
- 11. ALL INJURIES, NO MATTER HOW MINOR, SHOULD BE REPORTED TO YOUR SUPERVISOR IMMEDIATELY.
- 12. ALL INMATE WORKERS ARE PROHIBITED FROM BRINGING PERSONAL PROPERTY INTO, OR TAKING UNAUTHORIZED ITEMS OUT OF, UNICOR.
- 13. THE FABRICATION OR REPAIR OF PERSONAL ITEMS ON GOVERNMENT EQUIPMENT IS AGAINST THE REGULATIONS AND IS PROHIBITED IN THE UNICOR FACTORY.
- 14. THERE WILL BE ABSOLUTELY NO SMOKING IN THE FACTORY, EXCEPT IN DESIGNATED AREAS. ANY VIOLATION OF THIS RULE WILL RESULT IN AN IMMEDIATE INCIDENT REPORT AND POSSIBLE DISMISSAL FROM UNICOR EMPLOYMENT.
- 15. WORK STOPS 10 MINUTES PRIOR TO LUNCH FOR TOOL CALL AND WASH UP, AND 20 MINUTES PRIOR TO RECALL FOR TOOL CHECK IN, AREA CLEAN UP, AND TO WASH UP.
- 16. INMATES WHO RECEIVE A DISCIPLINARY SEGREGATION SANCTION ARE SUBJECT TO TERMINATION FROM UNICOR EMPLOYMENT, AND WILL BE PLACED ON THE NON-PRIORITY UNICOR WAITING LIST.
- 17 INMATES WHO HAVE TRANSFERRED FROM ANOTHER INSTITUTION DUE TO DISCIPLINARY REASONS WILL BE PLACEDON THE NON-PRIORITY UNICOR WAITING LIST.

I understand the above rules and regulations, and understand that disregard for any of the above shall constitute a reason for my termination from UNICOR Employment.

Signature:

Register No: 17110-016 Date: 6-19-01

FEDERAL PRISON INDUSTRIES, Inc.

UNICOR - MCKEAN

P.O. BOX 8000

Phone #(814) 362-8900 Fax #(814) 362-4151 MEMORANDUM

نوا

DATE: September 30, 1999

REPLY TO:

ATTN OF Martin Sapko, Factory Manager.

SUBJECT: Issuance of Safety Glasses

TO: New UNICOR Inmate Workers

Effective immediately, all workers who are required to wear safety glasses will be furnished one (1) pair of safety glasses, These safety glasses may e kept in the housing unit or work locker. However, regardless of where you store them, they are your responsibility and must be well be cared for. If you lose your safety glasses, \$5.00 will be deducted from your monthly UNICOR pay at the end of the month for each pair lost, Safety glasses are required for all production workers and must be worn everywhere on the factory floor.

Ι	re	2C	eived	one	(1)	pair	of	safety	glasses	on	6/19/01	
ar.	ıd	Ι	agree	e to	the	above	e c	ondition	ns.			1

	e e
Signature: Lewy Hell	
Name: JENN HILL	
Reg. Number:	

Date

Production Worker's Training Record

(CHECKLIST) for

Inmate Name Leny Hill	Reg. Number	17110-016
I have had a department orientation by my department supervise	or.	
2.y I have read and understand the Factory Rules and Safety Regula	ations.	
(1 3.) I have read and understand the department procedures for my as	ssigned area.	
(1) I have participated in the 3 credit hrs., Industrial Familiarization		
[5.] I have had on the job training with an experienced production w		
日 6.) I have read and understand my Job Description.		
7.) I have been instructed on the MSDS center in the Unicor Factor	y.	
8.) I have familiarized myself with ISO-9001-2000 standards, Unio and the role I play in the system.		M.S.,
Inmate Signature & (Reg. Number	6	-23-03 Date
My B	4	123/03
Woodworking Supervisor Signature		Deste

TITLE:	TRAINING RECORD	CON	TROL NO.	1403	DATE	6/11/03
Production -	UNICOR MCKEAN					0/11/03
	THE POST OF THE PO	REV:	Original	Issue	SHEET	1 OF 1

UNICOR McKean Federal Prison Industries, Inc. **Federal Correctional Institution** McKean, Pa. 16701

JOB DESCRIPTION REPORT

Inmate's Name: Kenny	Hill	Register Number: 17110-016				
Institution Code:	231	Industry Code:	MCFT			

Job Description: Wood	work Shophand	Department:	Packing			
		vrapping product. Secures loa og packed for surface defects o				
duties as assigned in UNICO		is packed for surface defects o	i diemisnes. Au dinei			
I have instructed inma	te Kenny Uill	Pog No 17	110 016			
in the proper procedure	es in which to im	plement his assigned w	ork detail, which			
includes standard main	tenance, safety p	rocedures, and routine	e us¢.			
			1			
)/////			
Foreman			Date			
			, ,			
I have received proper	instruction on h	ow to implement my job	assignment. If I			
nave any problem with	implementing my a	ssigned job, I am inst	ructed to contact			
ny f or eman immediately						
1/ / // //						
Jenny Hill		7//0-0/6 Register Number	7-17-01			
Signature of Inmate		Register Number	Date			

MCK2G 531.01 * INMATE HISTORY * 08-30-2006 PAGE 001 * WRK DETAIL * 14:59:09

REG NO..: 17110-016 NAME...: HILL, KENNY

FCL		DESCRIPTION	START DATE/T			TIME
PET	ORD CAR H	ORD CAR H	04-17-2006 0			
PET	VACATION	ALL VACATIONS	04-11-2006 0			
PET	ORD CAR H	ORD CAR H	01-18-2005 0			
PET	ORD EDUC	EDUCATION ORDERLY	09-29-2004 0			
PET	UNASSG	UNASSIGNED WORK DETAIL	09-27-2004 1			
PET	A/O	NEEDS A/O PROCESSING	08-27-2004 1			
PEM	UNASSG	UNASSG	08-25-2004 1			
PHL	UNASSG	UNASSG	08-23-2004 1			
LEW	UNASSG	UNASSIGNED WORK DETAIL	08-20-2004 1			
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	04-17-2004 0			
MCK	VACATION	VACATION	04-16-2004 0			
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	03-25-2004 0			
MCK	VACATION	VACATION	03-24-2004 0			
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	03-13-2004 0	0001	03-24-2004	0001
MCK	VACATION	VACATION	03-12-2004 0	0001	03-13-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	02-14-2004 0	0001	03-12-2004	0001
MCK	VACATION	VACATION	02-13-2004 0	0001	02-14-2004	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	01-21-2004 0	0001	02-13-2004	0001
MCK	VACATION	VACATION	01-20-2004 0			
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	11-29-2003 0	0001	01-20-2004	0001
MCK	VACATION	VACATION	11-26-2003 0	0001	11-29-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	10-24-2003 0	0001	11-26-2003	0001
MCK	VACATION	VACATION	10-23-2003 0	0001	10-24-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	09-16-2003 0	0001	10-23-2003	0001
MCK	VACATION	VACATION	09-15-2003 0	0001	09-16-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	07-19-2003 0	0001	09-15-2003	0001
MCK	VACATION	VACATION	07-17-2003 0	0001	07-19-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	04-17-2003 0	0001	07-17-2003	0001
MCK	VACATION	VACATION	04-14-2003 0	0001	04-17-2003	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	12-21-2002 0	0001	04-14-2003	0001
MCK	VACATION	VACATION	12-20-2002 0	0001	12-21-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	10-12-2002 0	0001	12-20-2002	0001
MCK	VACATION	VACATION	10-10-2002 0	0001	10-12-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	08-19-2002 0	0001	10-10-2002	0001
MCK	UNASSG	UNASSIGNED	08-15-2002 1	125	08-19-2002	0001
MCK	SHU UNASSG	SHU UNASSIGNED	08-12-2002 1	L657	08-15-2002	1125
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	06-21-2002 0	0001	08-12-2002	1657
MCK	VACATION	VACATION	06-17-2002 0	0001	06-21-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	05-08-2002 0	0001	06-17-2002	0001
MCK	UNASSG	UNASSIGNED	04-29-2002 0			
MCK	SHU UNASSG	SHU UNASSIGNED	04-07-2002 1			
						

G0002 MORE PAGES TO FOLLOW . . .

MCK2G 531.01 * INMATE HISTORY
PAGE 002 OF 002 * WRK DETAIL

08-30-2006

14:59:09

REG NO.:: 17110-016 NAME...: HILL, KENNY

FCL	ASSIGNMENT	DESCRIPTION	START DATE/T	IME STOP DATE/TIME	
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	02-16-2002 00	001 04-07-2002 1917	
MCK	VACATION	VACATION	02-14-2002 00	001 02-16-2002 0001	
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	08-25-2001 00	001 02-14-2002 0001	
MCK	VACATION	VACATION	08-24-2001 00	001 08-25-2001 0001	
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	07-05-2001 00	001 08-24-2001 0001	
MCK	I PACK 1	PACKING 1	06-19-2001 00	001 07-05-2001 0001	
MCK	ORD B A	ORDERLY BA	04-12-2001 00	001 06-19-2001 0001	
MCK	UNASSG	UNASSIGNED	04-11-2001 00	001 04-12-2001 0001	
MCK	A&O	ADMISSION & ORIENTATION	04-06-2001 08	845 04-11-2001 0001	
LEW	UNASSG	UNASSIGNED WORK DETAIL	04-02-2001 19	905 04-06-2001 0603	
OKL	UNASSG	UNASSIGNED HOLDOVER	03-28-2001 17	715 04-02-2001 0810	
THA	IND FIN PM	INDUSTRIES FINISH P.M.	11-06-2000 00	001 03-28-2001 0800	
THA	IND FINISH	INDUSTRIES FINISH	09-22-2000 00	001 11-06-2000 0001	
THA	ORD C	ORD	08-04-2000 00	001 09-22-2000 0001	
THA	UNASSG	UNASSIGNED WORK DETAIL	07-06-2000 10	000 08-04-2000 0001	
OKL	UNASSG	UNASSIGNED HOLDOVER	07-03-2000 16	540 07-06-2000 0710	

MCK	UNASSG	UNASSIGNED	08-15-2002	1125	08-19-2002	0001
MCK	SHU UNASSG	SHU UNASSIGNED	08-12-2002	1657	08-15-2002	1125
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	06-21-2002	0001	08-12-2002	1657
MCK	VACATION	VACATION	06-17-2002	0001	06-21-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	05-08-2002	0001	06-17-2002	0001
MCK	UNASSG	UNASSIGNED	04-29-2002	0754	05-08-2002	0001
MCK	SHU UNASSG	SHU UNASSIGNED	04-07-2002	1917	04-29-2002	0754

G0002 MORE PAGES TO FOLLOW . . .

MCK2G 531.01 * INMATE HISTORY * 08-30-2006 PAGE 002 OF 002 * WRK DETAIL * 14:59:54

REG NO.:: 17110-016 NAME...: HILL, KENNY

FCL	ASSIGNMENT	DESCRIPTION	START DATE/1	TIME	STOP DATE,	TIME
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	02-16-2002 0	0001	04-07-2002	1917
MCK	VACATION	VACATION	02-14-2002 0	0001	02-16-2002	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	08-25-2001	0001	02-14-2002	0001
MCK	VACATION	VACATION	08-24-2001	0001	08-25-2001	0001
MCK	I LAYUP 2	3:00 PM TO 11:00 PM	07-05-2001	0001	08-24-2001	0001
MCK	I PACK 1	PACKING 1	06-19-2001 0	0001	07-05-2001	0001
MCK	ORD B A	ORDERLY BA	04-12-2001 0	0001	06-19-2001	0001
MCK	UNASSG	UNASSIGNED	04-11-2001 0	0001	04-12-2001	0001
MCK	A&O	ADMISSION & ORIENTATION	04-06-2001	0845	04-11-2001	0001
LEW	UNASSG	UNASSIGNED WORK DETAIL	04-02-2001 1	1905	04-06-2001	0603
OKL	UNASSG	UNASSIGNED HOLDOVER	03-28-2001 1	1715	04-02-2001	0810
THA	IND FIN PM	INDUSTRIES FINISH P.M.	11-06-2000 0	0001	03-28-2001	0800
THA	IND FINISH	INDUSTRIES FINISH	09-22-2000 0	0001	11-06-2000	0001
THA	ORD C	ORD	08-04-2000 0	0001	09-22-2000	0001
THA	UNASSG	UNASSIGNED WORK DETAIL	07-06-2000 1	1000	08-04-2000	0001
OKL	UNASSG	UNASSIGNED HOLDOVER	07-03-2000 1	L640	07-06-2000	0710

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G0000 TRANSACTION SUCCESSFULLY COMPLETED



UNITED STATES GOVERNMENT **memorandum**

FEDERAL BUREAU OF PRISONS UNICOR FEDERAL PRISON INDUSTRIES Federal Correctional Institution, McKean Bradford, Pennsylvania

September 1, 2006

MEMORANDUM FOR DOUG GOLDRING, ASSISTANT GENERAL COUNSEL, FPI

FROM:

Tim Holohan, System Accountant

SUBJECT:

FPI Form 96

The original (attached) Form 96 dated August 20, 2004 for Inmate Hill, Kenny, reg. no. 17110-016 was a carbon form and is not legible. We are attaching a hand written replication of the Form 96 which can be easily read.

Please advise us if you would like us to proceed differently.

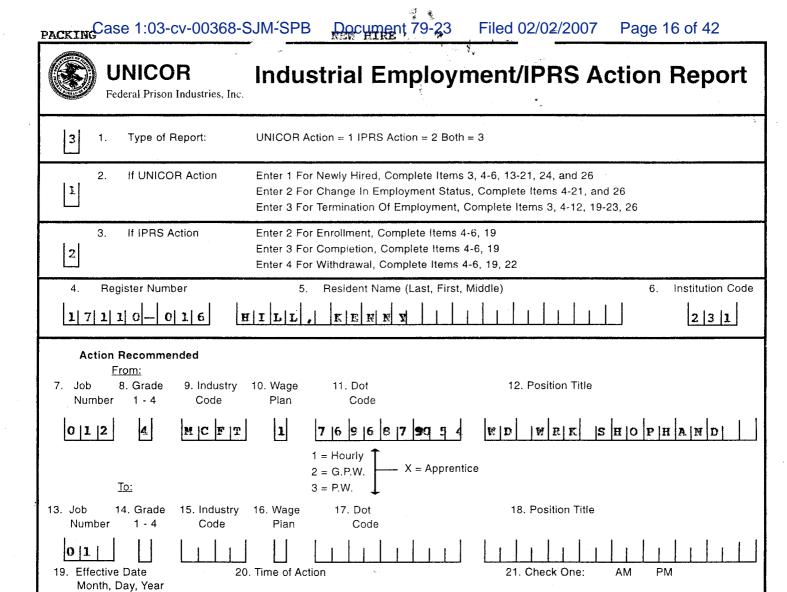


Industrial Employment/IPRS Action Report

			- · · · · · · · · · · · · · · · · · · ·
1. Type Of Report:	UNICOR Action = 1 IPRS Action = 2 B	oth = 3	
2. If UNICOR Action	Enter 1 For Newly Hired, Complete Iter Enter 2 For Change In Employment Sta Enter 3 For Termination Of Employmen	itus, Complete Items 4 - 21, and	
3. If IPRS Action	Enter 2 For Enrollment, Complete Item Enter 3 For Completion, Complete Item Enter 4 For Withdrawal, Complete Item	ns 4 - 6, 19	
4. Register Number	5. Resident Name (Last, First,	Middle)	6. Institution Code
Action Recommended From: 7. Job 8. Grade 9. Industry 1 Number 1 - 4 Code	0. Wage 11. Dot Plan Code	12. Position Title	
To: 13. Job 14. Grade 15. Industry 1	1 = Hourly 2 = G.P.W. 3 = P.W. $X = Apprentic$	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Number 1 - 4 Code	6. Wage 17. Dot Code	18. Position Title L	AM PM
22. Reason For Termination O 1 = Released 2 = Tra 5 = Program Discontinued	insferred 3 = Program Change	i = Inmate Request titutional Needs	
23. Continuation of Longevity 1 = yes 0 = no 2 = no	Status (For use only when termination is	s for release (MR or parole).	
24. Date (Of Enrollment Month, Day, Year		
25. Total Inma	te Hours Involved		
26. Signatures : Recommended By		Foreman	Date:
Approved By		Plant Superintendent	Date:
Approved By		Ass't Supt. Or Business Mgr.	Date:
Entered On Payroll Record	S -	Timekeeper	Date:
Revised Form 96			2011年1月1日 · 1912年 - 1

Distribution:

UNICOR Federal Prison Industries, Inc.	Industrial Em _l	ployment/IPRS Ac	ction Report
3 1. Type of Report:	UNICOR Action = 1 IPRS Actio	n = 2 Both = 3	
2. If UNICOR Action	Enter 2 For Change In Employe	plete Items 3, 4-6, 13-21, 24, and 26 ment Status, Complete Items 4-21, and ployment, Complete Items 3, 4-12, 19-2	
3. If IPRS Action	Enter 2 For Enrollment, Comple Enter 3 For Completion, Compl Enter 4 For Withdrawal, Compl	lete Items 4-6, 19	
4. Register Number	5. Resident Name (I	_ast, First, Middle)	6. Institution Code
Action Recommended From: 7. Job 8. Grade 9. Industry Number 1 - 4 Code	10. Wage 11. Dot Plan Code	12. Position Title	
01/12 4 MICFIT	1 = Hourly 🕇	10 5 4	1 15 140 19 HAMO
 -	16. Wage 17. Dot Plan Code	18. Position Title	
	Time of Action	21. Check One:	AM PM
Month, Day, Year $\mathcal{O}[\mathcal{S}]$ $=$ $ \mathcal{S} $	017/10		
22 . Reason For Termination 1 = Released 2 = Tran 5 = Program Discontinued	· · · · · ·	e 4 = Inmate Request	
23. Continuation of Longev 1 = yes 0 = no 2 = no		ation is for release (MR or parole).	
	ate Of Enrollment Month, Day, \	⁄ear	
25. Total Inm	ate Hours Involved		
26. Signatures:			
Recommended By		Foreman	Date:
Approved By		Plant Superintendent	Date:
Approved By		Ass't Supt. Or Business Mgr.	Date:
Entered On Payroll Records	5	Timekeeper	Date:



Signatures:	
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Recommended By Foreman	
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1 Hill Ann 1	
Approved By Ass't Supt. Or Bu	ısiness Mgr.
Entered On Payroll Records H. Herr Timekeeper	

3 = Program Change

4 = Inmate Request

(For use only when termination is for release (MR or parole).

FPI Form 96 (9/98)

26.

|0|6|-|1|9|-|0|1

1 = Released

5 = Program Discontinued

1 = yes 0 = no 2 = no

23. Continuation of Longevity Status

0 7 1 0

6 = Control Purposes

24. Date Of Enrollment Month, Day, Year

22 . Reason For Termination Of Employment Or Withdrawal 2 = Transferred

25. Total Inmate Hours Involved

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NOTE: THE SEFORM ON USUS SOLUM STEED 2 Document 79-23 WEEKS IN ADVANCE.

Filed 02/02/200 U.S. Department of Justice UNICOR



Federal Correctional Institution Ray Brook, NY 12977

Federal Prison Industries, Inc.

LAUMPIL		. ,		= 2-23-14	Sel
DEPARTMENT	HTLL	1/100/		DATE /	11109
NAME:	LAST	FIRST		REGISTRATION NUMBE	R
I REQUEST VACATION	FROM 4-16	то <u> 4-17 (</u>	1-DAY)		·
*I REQUEST TO WORK (MUST BE ANNIVERS INMATES SIGNATURE	MY VACATION A	ND RECEIVE PAY	IN LIEU OF TAK	ING THE DAYS OFF	
APPROVED BY: WORK SUPERVISOR	<u> </u>	16		PROVED BY: THE MAN AND AND AND AND AND AND AND AND AND A	
BUSINESS OFFICE:		,	š.	. / .	
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(½) (1)		,	-		
COMPUTED BY:	,	REVIEWED BY:	and to	FINAL APPRO	VED BY:
TIMEREEPER		ACCOUNTANT	~ i	SUPERINTENDE	NT
UNIT TEAM ACTION:		APPROVED:_		DISAF	PROVED
				PLEASE STATE I DISAPPROVED.	REASONS WHY IF
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			Age 		
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SIGNATURE					

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^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

NOTE: THIS FORM-MUSCIBLE SEPTOR 2 Document 79-23 WEEKS IN ADVANCE.

Filed 02/02/2000.S. Department of Justice UNICOR
Federal Prison Industries, Inc.

REQUEST FOR INMATE VACATION

Federal Correctional Institution Ray Brook, NY 12977

LAPUP :	7		3-8-04 Lug
DEPARTMENT			DATE
	47//	(6)1)	3.8-04 DATE 18:24
NAME:	LAST	FIRST	REGISTRATION NUMBER
I REQUEST VACATI	ON FROM 3-2	Уто 3-25 1-D	AP
	RK MY VACATION		OF TAKING THE DAYS OFF
INMATES SIGNATU	RE		
APPROVED BY:		ं स्व	APPROVED BY:
WORK SUPERVISOR		**h	DEPARTMENT HEAD
BUSINESS OFFICE: THE ABOVE NAMEI HAS ACCUMULATE AT 7:15 PAY A	D 18:24 DAY(S) VA	EN EMPLOYED IN INDUSTRIE	ES SINCE 6/19 19-2001, AND IT IS PRESENTLY BEING EARNED
COMPUTED BY:		REVIEWED BY:	FINAL APPROVED BY:
TIMEKEEPER		ACCOUNTANT	SUPERINTENDENT
UNIT TEAM ACTION	ī:	APPROVED:	DISAPPROVED PLEASE STATE REASONS WHY IF DISAPPROVED.
SIGNATURE			

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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LAY UP 2	REQUEST FOR INMATE VACATION	Federal Correctional Institution Ray Brook, NY 12977
DEPARTMENT		2-19-04 2 20
NAME: LAST	FIRST RI	19/10-016 EGISTRATION NUMBER
I REQUEST VACATION FROM	3-12 TO 3-13 1-DAU	
	TION AND RECEIVE PAY IN LIEU OF TAKING	G THE DAYS OFF
APPROVED BY:	APPR	OVED BY:
With		(Muther M
WORK SUPERVISOR	DEPART	MENT HEAD
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a to the second of the second
BUSINESS OFFICE:		. /
THE ABOVE NAMED INMATE HAS	S BEEN EMPLOYED IN INDUSTRIES SINCE_	6/19 10200, AND
	(S) VACATION VACATION CREDIT IS PRESE	TOTAL
AT 7:15 DAY-PER MONTH.		
(1/2) (1)		
COMPUTED BY:	REVIEWED BY:	FINAL APPROVED BY:
TIMEKEEPER	ACCOUNTANT	SUPERINTENDENT
UNIT TEAM ACTION:	APPROVED:	DISAPPROVÉD
		PLEASE STATE REASONS WHY IF DISAPPROVED.

SIGNATURE		

*THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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Layup 2	REQUEST FOR INMATE VAC	ATION Federal Correctional Institutio Ray Brook, NY 12977
DEPARTMENT		1-22-04 ZZ
<u> </u>	LL KUN/	#17110-016 111,09
NAME: LAST		REGISTRATION NUMBER
I REQUEST VACATION FROM	2-13 TO2-17 1-DAY	
*I REQUEST TO WORK MY VA (MUST BE ANNIVERSARY DA LEMANTES SIGNATURE	ACATION AND RECEIVE PAY IN LIEU OF ATE).	TAKING THE DAYS OFF
APPROVED BY: WORK SUPERVISOR		APPROVED BY: EPARTMENT HEAD
	HAS BEEN EMPLOYED IN INDUSTRIES S	<i>1</i>
· ·	BAY(S) VACATION VACATION CREDIT IS	S PRESENTLY BEING EARNED
AT 7:15 MAY PER MONTH	ł.	
(1/2) (1)		
COMPUTED BY: TIMEKEEPER	REVIEWED BY: ACCOUNTANT	FINAL APPROVED BY: SUPERINTENDENT
<u> </u>		
UNIT TEAM ACTION:	APPROVED:	DISAPPROVED
		PLEASE STATE REASONS WHY IF DISAPPROVED.
		·
SIGNATURE	1	

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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Federal Prison Industries, Inc.

	REQUEST FOR INMATE	VACATION	Ray Brook, NY 12977
149 MP TE		1-9-0	4 Brook, NY 129//
DEPARTMENT	en e	DATE	- yh
4722	(END)	17110-	25:24 016
NAME: LAST	FIRST	REGISTRATIO	
I REQUEST VACATION FROM $\frac{1-2}{2}$	<u>/_то/-22</u>	4 7	
*I REQUEST TO WORK MY VACATION (MUST BE ANNIVERSARY/DATE).			S OFF
INMATES SIGNATURE			
APPROVED BY:		APPROVED BY:	ĺ
William	e e e e e e e e e e e e e e e e e e e	T - Klasky MANN	AM
WORK SUPERVISOR	in the second se	DEPARTMENT HEAD	/
BUSINESS OFFICE:		~ /	×
THE ABOVE NAMED INMATE HAS BI	EEN EMPLOYED IN INDUSTRI	ES SINCE 6 / 19 19	2∞ /, AND
HAS ACCUMULATED 25,24 LAY(S)			G EARNED
AT 7:15 DAY PER MONTH.	\$ph.;		
(½) (Î)	ं स्थान्य		
COMPUTED BY:	REVIEWED BY:	FIN	AL APPROVED BY: /
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JYW	ACCOUNTANT	SI IDÊ	DINITENDENIE
ПМЕКЕЕРЕК	ACCOUNTANT	SOPE	RINTENDENT /
UNIT TEAM ACTION:	APPROVED:		DISAPPROVED
			E STATE REASONS WHY IF ROVED.
*	, (A.		
<u> </u>	· · · · · · · · · · · · · · · · · · ·		
SIGNATURE	· •		
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*THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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WEERS IN ADVAN	CE.			Federal Priso	R n Industries, Inc.
Layup-2		REQUEST FOR INMATE VACATION		Federal Corre Ray Brook, NY	ectional Institution
DEPARTMENT				5/ 04/ ATE	25:24
NAME:	LAST	FIRST	REGISTE	RATION NUMBER	
I REQUEST VACATIO	on from / - 20	то /- 🗸	21 1 DAY		
*I REQUEST TO WOR (MUST BE ANNIVER		AND RECEIVÈ PAY IN LI	EU OF TAKING THE	DAYS OFF	
INMATES SIGNATUR	E				
APPROVED BY: WORK SUPERVISOR		***	APPROVED I	an pri	
BUSINESS OFFICE:		★	. /		
HAS ACCUMULATED	DSDY DAY(S) VA	N EMPLOYED IN INDUST	· · · · · · · · · · · · · · · · · · ·	_19 ² ∞√, AND BEING EARNED	
AT 7:15 MAY PE	R MONTH.				

TIMEKEEPER

REVIEWED BY:

ACCOUNTANT

UNIT TEAM ACTION:

APPROVED:__

DISAPPROVED___

PLEASE STATE REASONS WHY IF DISAPPROVED.

SIGNATURE__

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

NOTE: THIS FORM- WEEKS IN ADVANCE		Pleb 2 Document 79-23	Filed 02/02/20	000.S. Department 44 Justice ■ UNICOR
Lay-op	ot valid	REQUEST FOR INMATE V	ACATION	Federal Prison Industries, Inc. Federal Correctional Institution Ray Brook, NY 12977
DEPARTMENT	14.77	V 20	11-7-0 DATE	3 (2-12445)
NAME:	LAST	FIRST	REGISTRATION NO.	0-0/6 ON NUMBER 25/29
I REQUEST VACATION	n from <u>//-26 -</u>	70/1-28 2 DAY	1 5	
*I REQUEST TO WORK (MUST BE ANNIVERS INMATES, SIGNATURE	SARY DATE).	ND RECEIVE PAY IN LIEU C	OF TAKING THE DAY	S OFF
APPROVED BY: WORK SUPERVISOR			APPROVED BY: DEPARTMENT HEA	Lu .
BUSINESS OFFICE: THE ABOVE NAMED I HAS ACCUMULATED; AT 7 11 5 645 PER (1/2) (1)	25:24 DAY(S) VAC	EMPLOYED IN INDUSTRIES ATION. VACATION CREDIT	S SINCE 6/19 TO SINCE 15 PRESENTLY BEIN	ĝ∽/, AND NG EARNED
COMPUTED BY:	i.	REVIEWED BY:	FII	NAL APPROVED BY:
TIMEKEÈPER		ACCOUNTANT	SUPI	ERINTENDENT /
UNIT TEAM ACTION:		APPROVED:		DISAPPROVEDE STATE REASONS WHY IF 'PROVED.
SIGNATURE		,		
*THIS REQUEST FOR TOP (PLEASE SUBMIT FOR	PAY IN LIEU OF VA UR (4) COPIES TO IN	CATION MAY ONLY BE MA DUSTRY BUSINESS OFFICE	LDE ON THE ANNIVE	ERSARY DATE.

Business Office (White) • Timekeeper (Yellow) • Unit (Green) • Factory (Pink) • Inmate (Golden Rod)

F.P.I. Form 39

Document 79-23

Filed 02/02/2007

Page 24 of 42

From:

Tim Holohan

To:

Mincemoyer, Chris 10/22/03 10:20AM

Date: Subject:

Award Day

Chris,

Can you accept this as granting an on the spot award day fro Kenny Hill (2nd shift)?

He suggested a safety issue to us on the lay-up line regarding placing non-skid material on either side of the elevated platform.

I told Hill he could use this on Thursday, October 23, 2003.

Thanks,

Tim

17/10-016 Lay 2

NOTE: TOUS FORM-MUSTOBESSUM SPED 2 Document 79-23 WEEKS IN ADVANCE.



1044172	REQUEST FOR INMATE VA	ACATION FO	Federal Correctional Institution Ray Brook, NY 12977	
DEPARTMENT		8-29-0. DATE	3 y/3 25/24	
NAME: LAST	FIRST	REGISTRATION	NUMBER	
I REQUEST VACATION FROM	15 to 9-16-03 /	DR. J		
*I REQUEST TO WORK MY VACAT (MUST BE-ANNIVERSARY DATE)	TON AND RECEIVE PAY IN LIEU O	F TAKING THE DAYS O	FF	
To be William	for a company			
INMATES SIGNATURE				
	, Au			
APPROVED BY:	La Constitution	APPROVED BY:		
W. Mits		2 Jala W/ M		
WORK SUPERVISOR		DEPARTMENT HEAD	at	
BUSINESS OFFICE:	<u> </u>	***		
	BEEN EMPLOYED IN INDUSTRIES	SINCE 6 /19 402C	AND	
	(S) VACATION. VACATION CREDIT			
AT 71/6 DAY PER MONTH.	(a) (1.10.10			
(½) (1)			1	
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COLONIES		THE I A		
COMPUTED BY:	REVIEWED BY:	FINAL	APPROVED BY:	
		·	Ville HALL MAY	
TIMEKEEPER	ACCOUNTANT	SUPERIN	ITENDENT /	
UNIT TEAM ACTION:	APPROVED:		DISAPPROVED	
		PLEASE S	TATE REASONS WHY IF	
		DISAPPRO		
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	50 (4 0)			
SIGNATURE		: : :		

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

NOTE: THIS FORM MUST BE STIM-SPB 2 Document 79-23 WEEKS IN ADVANCE.



	REQUEST FOR INMATE V	ACATION	<i>alon</i> '
DEPARTMENT		6-19-02 DATE	18:09
NAME: LAST	7.7) \/ FIRST	17/10-016 REGISTRATION NUMB	ER /
i request vacation from_7/	117/000 7/19/03 (2d	e45)	
*I REQUEST TO WORK MY VACAT (MUST BE ANNIVERSARY DATE). INMATES SIGNATURE		OF TAKING THE DAYS OFF	
APPROVED BY: WORK SUPERVISOR		APPROVED BY: DEPARTMENT HEAD	
BUSINESS OFFICE: THE ABOVE NAMED INMATE HAS HAS ACCUMULATED 18:49 544 AT 7:15 DAY PER MONTH. (1/2) (1)			
COMPUTED BY: TIMEKEEPER	REVIEWED BY: ACCOUNTANT	FINAL APPR	Man My
UNIT TEAM ACTION:	APPROVED:		APPROVEDREASONS WHY IF
SIGNATURE			

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

NOTE: THIS FORM MUST BE SU TIED 2 Document 79-23 WEEKS IN ADVANCE.

Filed 02/02/2007 Page 27 of 42 U.S. Department of Justice



1	REQUEST FOR INMATE	VACATION SAGE	,
for the first of the second			
		25/29	
DEPARTMENT		DATE	Ì
	in the second of		
NAME: LAS	T FIRST	REGISTRATION NUMBER	1
I REQUEST VACATION FROM	<u>по то ту</u>	9. V.	
TREQUEST VIICITION TROIT	#4 - #4		a ministra
	ACATION AND RECEIVE PAY IN LIEU	J OF TAKING THE DAYS OFF	
(MUST BE ANNIVERSARY D	AIE).		
INMATES SIGNATURE			
	· .		
APPROVED BY:		APPROVED BY:	
W hich			
WORK SUPERVISOR		DEPARTMENT HEAD	
BUSINESS OFFICE:			
	E HAS BEEN EMPLOYED IN INDUSTR	IES SINCE 6 //9 19246 /, AND	
	DAY(S) VACATION. VACATION CREI		
* * * * * * * * * * * * * * * * * * *		II IS FRESENTLY BEING EARNED	
AT 7//5 -DAY PER MONT	н.		
(1/2) (1)			
COMPUTED BY:	REVIEWED BY:	FINAL APPROVED BY:	
ALL.	HILE .		
TIMEVEEDED	ACCOUNTANT	SUPERINTENDENT	
TIMEKEEPER	ACCOUNTANT	SUFERINTENDENT	•
UNIT TEAM ACTION:	APPROVED:	· · · · · · · · · · · · · · · · · · ·	
		PLEASE STATE REASONS WH DISAPPROVED.	IY IF
	<u> </u>		
SIGNATURE			

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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Filed 02/02/2000.S. Deger2ment43 Justice



LAYUP	REQUEST FOR INMA	TE VACATION	Federal Correctional Institution Ray Brook, NY 12977
DEPARTMENT		/ <u>2-6-</u> C	22 JAC
HIK	L TENDY	= 17110	2-016
NAME: LAS	ST FIRST	REGISTRATIO	ON NUMBER
I REQUEST VACATION FROM	M/2-20 TO/2-23		
*I REQUEST TO WORK MY V (MUST BE ANNIVERSARY D	ACATION AND RECEIVE PAY IN LI	EU OF TAKING THE DAYS	S OFF
INMATES SIGNATURE			
APPROVED BY:	and the second s	APPROVED BY:	/4
		1- Walahan	1
WORK SUPERVISOR	States States	DEPARTMENT HEAD	,
BUSINESS OFFICE:			
and the second s	E HAS BEEN EMPLOYED IN INDUST	rdies since 6/9 40	AND
HAS ACCUMULATED 25:24	ሎና _DAY (S) VACATION. VACATION CR	,	
AT 7115 PER MONT	rH.		
(½) (1)	And the second		
COMPUTED BY:	REVIEWED BY		IAL APPROVED BY:
H.	(Start)	1	· los la han /m
TIMEKEEPER	ACCOUNTANT	SUPE	RINTENDENT
UNIT TEAM ACTION:	APPROVED:		DISAPPROVED
			E STATE REASONS WHY IF ROVED.
			
			,
SIGNATURE			

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

NOTE: Case 1.03-cv-00368-S.IM-SPR Document 79-23 Filed 02/02/2007 Page 29 of 42 U.S. Department of Justice Federal Prison Industries, Inc. REQUEST FOR INMATE VACATION NAME: I REQUEST VACATION FROM D-10 to 10-12-*I REQUEST TO WORK MY VACATION AND RECEIVE PAY IN LIEU OF TAKING THE DAYS OFF (MUST BE ANNIVERSARY DATE). INMATES SIGNATURE APPROVED BY: APPROVED BY: WORK SUPERVISOR **BUSINESS OFFICE:** THE ABOVE NAMED INMATE HAS BEEN EMPLOYED IN INDUSTRIES SINCE 6 HAS ACCUMULATED / S.C.7 PAY(S) VACATION. VACATION CREDIT IS PRESENTLY BEING EARNED AT 7./5 DAY PER MONTH. FINAL APPROVED BY: **UNIT TEAM ACTION:** APPROVED: DISAPPROVED___ PLEASE STATE REASONS WHY IF DISAPPROVED.

SIGNATURE_____

*THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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UNICOR
Federal Prison Industries, Inc.

REQUEST FOR INMATE VACATION

1.18 447	# * -		6-26-02 10:59
DEPARTMENT	•		DATE
	J. J. J. J.	475.50	417110-616
NAME:	LAST	FIRST	REGISTRATION NUMBER
I REQUEST VAC	ation from Z	то 7 6 / 194	
	IVERSARY DATE).	N AND RECEIVE PAY IN LIE	J OF TAKING THE DAYS OFF
APPROVED BY:			APPROVED BY:
WORK SUPERVIS	SOR		DEPARTMENT HEAD
BUSINESS OFFIC	DE:		
		EEN EMPLOYED IN INDUSTR	IES SINCE 6 / 19 19266/, AND
HAS ACCUMULA	ATED 0. '54 BAY(S)	VACATION. VACATION CRE	DIT IS PRESENTLY BEING EARNED
AT 7 15 - 64	Y P ER MONTH.		
(1/2)			
COMPUTED BY:	•	REVIEWED BY:	FINAL APPROVED BY:
TIMEKEEPER		ACCOUNTANT	SUPERINTENDENT
UNIT TEAM ACT	TION:	APPROVED:	DISAPPROVED
			PLEASE STATE REASONS WHY IF
			PLEASE STATE REASONS WHY IF
			PLEASE STATE REASONS WHY IF
			PLEASE STATE REASONS WHY IF DISAPPROVED.

^{*}THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

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Filed 02/02/200 U.S. Department of Justice
UNICOR
Federal Prison Industries, Inc.

12	REQUEST FOR INMATE VACATION			
DEPARTMENT			DATE	State garren -
		CAND!	44 / 7770 - 074	
NAME:	LAST	FIRST	REGISTRATION NUMBER	
I REQUEST VACAT	TION FROM 6-17	то <u></u> 6- <u>< 0</u>	\$ 12 P	
*I REQUEST TO WO (MUST BE ANNIV INMATES SIGNATION	ERSARY DATE).	AND RECEIVE PAY IN I	LIEU OF TAKING THE DAYS OFF	
APPROVED BY,	the		APPROVED BY:	
WORK SUPERVISO	R		DEPARTMENT HEAD	
HAS ACCUMULAT		EN EMPLOYED IN INDUS	STRIES SINCE19, AND PREDIT IS PRESENTLY BEING EARNED	
COMPUTED BY:		REVIEWED BY: ACCOUNTANT	FINAL APPROVE SUPERINTENDENT	made .
UNIT TEAM ACTIO	N:	APPROVED:	DISAPPR PLEASE STATE REA DISAPPROVED.	
		189		
 				·
SIGNATURE				

NOTE: THIS FORM WUST 300 SUBMITTED 2 Document 79-23 WEEKS IN ADVANCE.



LANUP	REQUEST FOR INMATE	VACATION
DEPARTMENT		DATE 25. 34
NAME: L	AST FIRST	REGISTRATION NUMBER
I REQUEST VACATION FR	ом	PAYS
*I REQUEST TO WORK MY (MUST BE ANNIVERSARY INMATES SIGNATURE	VACATION AND RECEIVE PAY IN LIEU V DATE).	J OF TAKING THE DAYS OFF
APPROVED BY:		APPROVED BY:
Les Marie		
WORK SUPERVISOR		DEPARTMENT HEAD
BUSINESS OFFICE:		
	ATE HAS BEEN EMPLOYED IN INDUSTR	IES SINCE 6/19 19-2001, AND
	DAY(S) VACATION. VACATION CREI	
AT 7/15 DAY PER MOI		
(1/2) (1)		
COMPUTED BY:	REVIEWED BY:	FINAL APPROVED BY:
	REVIEWED B1.	1 Drove H. Browney I.
TIMEKEEPER	ACCOUNTANT	SUPERINTENDENT
	<u> </u>	
UNIT TEAM ACTION:	APPROVED:	DISAPPROVED
		PLEASE STATE REASONS WHY IF DISAPPROVED.
		
	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE		

*THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

Copy - Inmate

INMATE REQUEST TO STAFF MEMBER

Federal Bureau of Prisons	
	DATE: 6-22-01
	eager
(Name and tirle of officer)	
Subject: State completely but briefly the problem on which you desire assistant	ce, and what you think should be done (Give details).
A B O O D D A	In I I All Day
Dutt Man lenga Show	That a mana
The Joseph Mason	A face of
Attend The Get Class	luciandes / Mores
2º em f 3º em lecall Ma	Janko Ven
horing you Take this is	Consideration.
Per 22	+1.11. (pus)
	many vive,
Name: Temporal Comments of the	No.: 17110-016
Work assignment: Packing Department	Unit: SA-235L
NOTE: If you follow instructions in preparing your request, it can be disposed interviewed, if necessary, in order to satisfactorily handle your request. Your fait in no action being taken.	of more promptly and intelligently. You will be lure to specifically state your problem may result
DISPOSITION: (Do not write in this space)	DATE:
1/62	
	1 Day He Op
	English MOUNT PRO PACK I Dy-up-2 LAYUP 2
1/6/22/0/ 2).	Pack I
	eg-up-2 LAYUP2
	7/5/01
	1/2/~
Original - File	Officer

NOTE: TURNS FORM-MUST RESSEN TO 2 Document 79-23 WEEKS IN ADVANCE.



REQUEST FOR INMATE VACATION

DEPARTMENT			DATE //
	ANA.	Christy C	free Comments
NAME:	LAST	FIRST	REGISTRATION NUMBER
I REQUEST VACA	ATION FROM		day
	WORK MY VACATION VERSARY DATE).	AND RECEIVE PAY IN LI	IEU OF TAKING THE DAYS OFF
Alexander Des	21		
INMATES SIGNA	TÜRE		
	and the same of th		
APPROVED BY:	Andrews Andrews		APPROVED BY:
WORK SUPERVIS	OR		DEPARTMENT HEAD
BUSINESS OFFICE	E:		
THE ABOVE NAM	MED INMATE HAS BE	EN EMPLOYED IN INDUST	TRIES SINCE (//5 19 20 0), AND
			EDIT IS PRESENTLY BEING EARNED
AT DÁÝ	PER MONTH.	,	
(1/2)) (1)			
COMPUTED BY:		REVIEWED BY:	FINAL APPROVED BY:
			The North Annual Control of the Cont
TIMEKEEPER		ACCOUNTANT	SUPERINTENDENT
	444		
UNIT TEAM ACTI	ON:	APPROVED:	DISAPPROVED
			PLEASE STATE REASONS WHY IF DISAPPROVED.
· · · · · · · · · · · · · · · · · · ·			
SIGNATURE		<u> </u>	

*THIS REQUEST FOR PAY IN LIEU OF VACATION MAY ONLY BE MADE ON THE ANNIVERSARY DATE. (PLEASE SUBMIT FOUR (4) COPIES TO INDUSTRY BUSINESS OFFICE)

INMATE PAYROLAS em 4 f03 mc c 000368-SANPSTB 06 10 BC Ument 79-23 ER THE C 02/02/02/2007 Page 35 of 42 GROUP: ft 3 CREW: PACKING FACT: FT INST: MC Grade: 5 Name: HILL, KENNY Reg-num: 17110-016 Amount Hours \$ 12.13 52:45 Date Computed 07/02/01 Standard Pay 06/19/01 Group Incentive Pay 0.00 0:00 Anniversary Date Longevity Months 0.00 0:00 Indiv. Incentive Pay Overtime Premium Pay 0.00 0:00 UNICOR Work Months Accrued Vacation Hours 0.00 0:00 003:45 Holiday Pay Prev Yrs Vacation Hours 000:00 Administrative Pay 0.58 2:30 Vacation Taken Pay 0.00 0:00 Unpaid Call-out Hours 12:15 Vacation Cashed Pay 0.00 0:00 Rework Hours Lost Time Wage 0.00 0:00 Unpaid Off-std Hours 0:00 0.00 Final Pay? Premium Pay 0.00 Longevity Pay 12.71 Gross Pay Chris/ Davis Chris/ Davis -Adjustments 0.00 Net Pay Grade Was Grade 4

Grade Tf No th

prior please set with

correct, please set him. Thanks, Tim H. P.S. can Davis chech his longe with also.

4 AGE :

TIMENTE PRIMITIO -

FDATE: 07/05/U1 13:42

Federal Bureau of Prisons	THERETE KEZOEDI 10
	DATE: 6-2×
01 0 1	DATE: O
o: Mr. Sanka	Cactorer Manager
	Name and tiple of officer)
dbject. State completely but briefly the problem of	on which you desire assistance, and what you think should be do
I would like	to save to the Y. M.
d. 88	> EALL ILKOLY
we sa key cem.	Drug Milonor 10 Mil
well Illa Jessica	2 Stares That moon
es hwice la week	E. Ulso, A have to
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2º em to 3º em. Meca	Ill Manhall
	*
Joseph you take	his in Consideration
	Espectfully our,
1 3/40/)	
ame: The Tell	No.:/7/10-016
ork assignment: Jacking De	81.2351
	request, it can be disposed of more promptly and intelligently. You will
terviewed, if necessary, in order to satisfactorily ha	andle your request. Your failure to specifically state your problem may re
no action being taken.	
SPOSITION: (Do not write in thi	is space) DATE:
. 1/ -	
1147	01/
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W	6) English Moules
\mathcal{M}	101 Dunk
11/1/14/	1). — I

Original - File Copy - Inmate Officer

UNICOR

(FCI McKean) "Notice of Unsatisfactory Work Performance"

To:	Hill, Kenny	· · - · · · · · · · · · · · · · · · · · 	Number:	17110-016	Date: <u>9</u> -	-22-03
	(Name Last, F	irst)				
UNI	COR McKean s	start date:	Current (Grade: 4	Unit: _B	8-A
This	is to advise you	of your unsatisfacto	ory work perform	nance on:	9-22-03	
		e Hill #17110-016, w				
		to work was 5:40pm	, inmate Hill did	not return to	work until 5	:47pm,
this	making him 7 m	inutes late.				
						· · · · · · · · · · · · · · · · · · ·
Supe	ervisor's Recom	mendation:				
		1) Written Warnir	g YES			
		2) Grade Reductio	n fromto	; No. of d	lays	
		3) Job Change	***·			
		4) Removal *				
		5) Other				
for Super	"Removal," rintendent of In te signature	hether related acts All recommendation dustries. Date	ns for "Remo	val" must l	re the recombe approve _9-22-03	d by the
inal (disposition:			· · · · · · · · · · · · · · · · · · ·	T#***	
		,, , ,				
			Superi	ntendent of In	dustries	Date

UNICOR

(FCI McKEAN)

"Notice of Unsatisfactory Work Performance"

Name: ////////////////////////////////////	Number: <u>/7//0-016</u>	Date: 9/8/03
UNICOR McKean start date:	Current Grade: Unit:	This is to
advise you of your unsatisfactory work performa	ance on:	
Attempted to leave		a 16 oz
· · · · · · · · · · · · · · · · · · ·		
Supervisor's Recommendation: 1) Written Warning 2) Grade Reduction from 3) Job Change		
4) Removal **		
5) Other:		
Third offenses, whether related acts, or All recommendations for "Removal" must	not, automatically require the recommend be approved by the Superintendent of Ir	dation for "Removal". Industries.
NOTE: Your signature is not an admission of guilt this matter.	. It merely indicates that you have been	counselled concerning $48/03$
Ingriaté Signature Date	Staff/Signati	ure Date
inal disposition:		
		· · · · · · · · · · · · · · · · · · ·

Employee Work History

Ł.

NAME:	Hill, K	ENNY	NO	# 17110-616		
HIRE DATE: _	06/19/	6/	Prior U	UNICOR Credit Accepted: _	07	Months

Year 2002

	# Months	Vac Earned	Vac Used	Vac Balance	Remarks
Jan	15	7:15		25:39	
Feb	16	7:15	14130	25:37	MAC 714 9/15 Erree + 7/30 WM
Mar	17	7115	7:30	25124	<u> </u>
Apr	18	7:15		32: 39	
May	19	7/15		35:54	
Jun	20	7/15	29:00+7:15	10:54	VAC 47 18 119 60 1/2
Jul	21	7:15	7/15	10:54	UAC 75 Ja J
Aug	22	7:15		18:09	
Sep	23	7/15	7115	18:09	VAC 9/16 2
Oct	24	7115	14/30	10:54	VAC 1/11 1/12 05
Nov.	25	7/15		18;69	į.
Dec	26	7715	7:15+7:15	16:54	UAC 1/20133

Year 2003

rear <u>20</u>					
	# Months	Vac Earned	Vac Used	Vac Balance	Remarks
Jan	27	7/15 7/15		Mis 18:09	
Feb	28	715,75K	111547115	7:15	UAC 74 75
Mar	29	7134 7165		7115+ 18169	Ja
Apr	30	7115+ 7115	21:45	7115 3139	Vac 4/15 4/16
May	31	rilst 7115		7115+ 10:54	
Jun	32	7115+745		7:15+ 18:09	
Jul	33	7115+ 7115	14130	7:15+ 10:54	VAC 1/1 1/18
Aug	34	7:15+ 7:15		7:15+ 18:09	
Sep	35	7:115+7:15	7:30+7:15	7:15 10:54	We 45 36
Oct	36	1545 TIS	7/115	7:15/ 18:09	VA. 183
Nov	37	7115+ 715	14130	7115- 10:59	un- 46 45
Dec	'38'	7:15+ 7:15		71157 /8109	

Year 2004

Tear	# Months	Vac E	rned	Vac Used	Vac	Balance	Remarks
Jan	35	7115+	7:15	7115+716	7115+	10154	UN- 40 /21
Feb	40	7:151	730	7115	7:118+	104541	199 7/3 THE
Mar	41	7:15+	7.15		2.15+	3:54	Utc 3/2 1/24
Apr	47	7:16+	114	= ,5	7:15+	3154	VAC 4/16
May	43	785+	7/15		7:15+	11:09	
Jun	44	745t-	7315	7/15	205+	11:09	1/20 9/29
Jul	45	7:15	7:15		7:15	18:24	
Aug				7754775			VAC 43 420
Sep							
Oct							
Nov							
Dec							

. Employee Work History

Name: Hill, Kenny	No#17110-016	· .	•
Hire Date: 06/19/01	Prior UNICOR Credit Accepted:	07	Months

Year: 2000

# Months	Vac Eamed	Varite	**************************************	
		A4C.028G	Vac Balance	Remarks
	# Months			73C Balanca

Year: 2001

	# Manths	Vac: Eamed	Vac Used	Vac Balance	
Jan					Remarks:
Feb					
Mar					
Apr					
May					
Jun	08	3:45		3:45	
Jul	9	3;45		7,30	·
Pug	10	3:38	7:15	3153	1. X
Sep	11	3/38		7/31	VAC \$/14
Oct	12	3:38		11109	
Nav	13	7:15	7:15	11109	1. 12. £
Dec	14	7:15		18124	VAC 1/26 82

GED N

MCK2G 531.01 * PAGE 001 OF 001 *

INMATE HISTORY WRK DETAIL

age 41 ...

Chroling

06-15-2001

14:48:22

REG NO.:: 17110-016 NAME...: HILL, KENNY

CATEGORY: WRK FUNCTION: PRT FORMAT:

FCL	ASSIGNMENT	DESCRIPTION	START DATE/TIME STOP DATE/TIME	
MCK MCK	ORD B A UNASSG	ORDERLY BA UNASSIGNED	04-12-2001 0001 CURRENT 04-11-2001 0001 04-12-2001 0001	
MCK	A&O	ADMISSION & ORIENTATION	04-06-2001 0845 04-11-2001 0001	
LEW	UNASSG	UNASSIGNED WORK DETAIL	04-02-2001 1905 04-06-2001 0603	
OKL	UNASSG	UNASSIGNED HOLDOVER	03-28-2001 1715 04-02-2001 0810	
THA	IND FIN PM	INDUSTRIES FINISH P.M.	5 11-06-2000 0001 03-28-2001 0800 5	i L
THA	IND FINISH	INDUSTRIES FINISH	❖ 09-22-2000 0001 11-06-2000 0001 1	ל
THA	ORD C	ORD	08-04-2000 0001 09-22-2000 0001	ŗ
THA	UNASSG	UNASSIGNED WORK DETAIL	07-06-2000 1000 08-04-2000 0001	
OKL	UNASSG	UNASSIGNED HOLDOVER	07-03-2000 1640 07-06-2000 0710	

pack I CK
C/19/01 PAION

MCK2G * INMATE DISCIPLINE DATA *
PAGE 001 OF 001 * CHRONOLOGICAL DISCIPLINARY RECORD * 06-15-2001 14:48:07

REGISTER NO: 17110-016 NAME.: HILL, KENNY
FUNCTION...: PRT FORMAT: CHRONO LIMIT TO ____ MOS PRIOR TO 06-15-2001